

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Shih-Jen Liu, et al

Serial No. : 10/072,185

Filed : February 8, 2002

Title : ENHANCING CELL-BASED IMMUNOTHERAPY

Art Unit : 1644

Examiner : Michael Edward Szperka

Confirmation No.: 3503

Notice of Allowance Date: July 5, 2006

**MAIL STOP ISSUE FEE**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed July 5, 2006, enclosed is a completed issue fee transmittal form PTOL-85b.

The fees in the amount of \$1000 are being paid concurrently on the Electronic Filing System (EFS) by way of Deposit Account authorization. Please apply any other required fees to deposit account 06-1050, referencing the attorney docket number shown above.

Respectfully submitted,

Date: 8-8-2006



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## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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26161 7590 07/05/2006

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/072,185	02/08/2002	Shih-Jen Liu	13886-002001 / 01P0325	3503

TITLE OF INVENTION: ENHANCING CELL-BASED IMMUNOTHERAPY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	10/05/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
TIDWELL, JUDY LILLE		1642	514-012000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 <u>Fish &amp; Richardson P.C.</u> 2 _____ 3 _____
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. <b>Use of a Customer Number is required.</b>		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ANAWRAHTA BIOTECH CO., LTD.

TAIPEI-SHIEN, TAIWAN

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date 8/8/2006

Typed or printed name

Jianming Hao

Registration No. 54,694

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